PTO/SB/06 (08-03)

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1 ATENT AFFEIGATION FEE DETERMINATION RECORD									Application of Dogket Number		
Substitute for Form PTO-875									) De	1825	445
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
L.,	FOR	NUMB	NUMBER FILED		NUMBER EXTRA		RATE	FEE		PATE	
(37	SIC FEE CFR 1.16(a))					1				RATE	FEE
TOTAL CLAIMS (37 CFR 1.16(c))						1		<u></u>	OR		<u> </u>
INDEPENDENT CLAIMS		MS	minus 20			-	× s=		OR	x s=	
<b> </b>	CFR 1.16(b))		minus 3	=   .		.	x s=		OR	× \$ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						] [	+ \$=		OR	+ \$=	
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II											
3-876 (Column 1) (Column 2) (Column 3)					SMALL E	ENTITY	OR '		R THAN ENTITY		
⋖		CLAIMS REMAINING		HIGHEST NUMBER	PRESENT	] [	DATE		1	SWALL	EMILIA
AMENDMENT		AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA		RATE	ADDI: TIONAL		RATE	ADDI- TIONAL
	Total (37 CFR 1.16(c))	10	Minus	30	1	1 1	· ·	FEE			FEE
	Independent (37 CFR 1;16(b))	1	Minus	···· 🗴	1-(1)	1	X \$=		OR	× s=	
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					1	x s=		OR	× \$=	
						] [	+s=		OR	+ s=	
		<b>10</b>					ADD'L FEE		OR	ADD'L FEE	
_	(Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST					1 r		·			
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total (37 CFR 1.16(c))	•	Minus	••	=	1	x \$ =	,,,,,,			FEE
	Independent (37 CFR 1.16(b))	•	Minus	***	=	1	x s =		OR	X \$=	
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM (37 CFR 1.16(d))					1	^ 3		OR	× \$=	
						] [	TOTAL		OR	TOTAL	<del></del>
		(Caluma 1)					ADD'L FEE		OR	ADD'L FEE	
		(Column 1) CLAIMS	Г	(Column 2) HIGHEST	(Column 3)	1 r			ì		
ТС		REMAINING AFTER		NUMBER	PRESENT		RATE	ADDI-		RATE	ADDI-
AMENDMENT	Total	AMENDMENT	ļ	PREVIOUSLY PAID FOR	EXTRA			TIONAL FEE			TIONAL FEE
	(37 CFR 1.16(c))		Minus	••	2		X \$ =		OR	x \$ =	
	Independent (37 CFR 1.16(b))	•	Minus		=		x \$ =		OR	X 5 =	
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+; =		OR		
						, [	TOTAL			TOTAL	
	• If the entry in o	olumn 1 is less tha	in the entry	in column 2, writ	e "0" in column :	3.	ADD'L FEE		OR	ADD'L FEE	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											

The 'Highest Number Proviously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.